

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003975

Entity Name: FAMILY HERITAGE HOUSE, INC.**Current Principal Place of Business:**STATE COLLEGE OF FLORIDA
5840 26TH STREET W
BRADENTON, FL 34207**Current Mailing Address:**3610 4TH AVENUE NE
BRADENTON, FL 34208 US**FEI Number:** 65-0509048**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LYNETTE, EDWARDS H
3610 4TH AVE NE
BRADENTON, FL 34208 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** LYNETTE H. EDWARDS

01/31/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BROWN, GWENDOLYN Y
Address 2806 27TH CT. E
City-State-Zip: PALMETTO FL 34221

Title PRESIDENT
Name BROWN, FREDI
Address 1310 61ST ST. W.
City-State-Zip: BRADENTON FL 34209

Title CHAIRMAN
Name ANDERSON, TOMMIE J
Address 510 21ST AVE. WEST
City-State-Zip: BRADENTON FL 34205

Title DIRECTOR
Name NASH, BEVERLY
Address 9026 NW 44TH COURT
City-State-Zip: SUNRISE FL 33351

Title TREASURER
Name EDWARD, LYNETTE
Address 3610 4TH AVE NE
City-State-Zip: BRADENTON FL 34208

Title DIRECTOR
Name RAY, JACQUELINE DR.
Address 5679 EAST WIND DR.
City-State-Zip: SARASOTA FL 34233

Title DIRECTOR
Name ELLIOTT, TRACY
Address 5840 26TH STREET WEST
City-State-Zip: BRADENTON FL 34207

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LYNETTE EDWARDS

TREASURER

01/31/2016

Electronic Signature of Signing Officer/Director Detail

Date